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A Dissertation.

On Strabismus.. Ophthalmic.

by

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On Exuberant Ophthalmia.

Among the very great variety of diseases which are incident to the eye, the puerer more than one of more frequency, greater consequence or is subsiding to the hyperopia, as the subject of the thesis. by more frequency, for there is scarcely an affection to which the eye is incident that inflammation is not an attendant in either the one or the other of its stages... of greater consequence for its apt to induce a variety of other affections of the eye which will be considered hereafter.. by subsiding to the hyperopia, for after pursuing every variety and plan of treatment, which experience and inquiry can devise, the surgeon has but too often the mortification to learn, & say notwithstanding the aid of all his science and skill for weeks may even for months that the disease is still pursuing its monotonous, & the perhaps changed to some one of its numerous degrees.

2.
By Ophthalmia in its most general sense I mean
constant every state of the eye and its appendages
where there exists pain, and an unnatural degree
of redness. It is an inflammation of the mucous mem-
brane of the whole ball of the eye and its various
appendages. Deaupe divided Ophthalmia into the
acute and chronic kind. In the former there being
an excess of vascular action, in the latter the vessels
are in a state of debility, and consequence of the previous
excitement. This assignment was however found
not altogether objectionable, for he used the word
chronic in the general a sense implying indiscri-
minately that debility, and torporance which
succed to a violent reaction. And that constant
state of irritability, which is occasioned by disquiescence
or binocular taint on the system. Knowing however
no distinction between idiopathic, and symptomatic
Ophthalmia, in the former considering it as a
primary disease induced by any of the various

poison which affect the system, the latter proceeding from disease of the eye and its various appendages or disease of the system. Small Pox and Rubella, are examples of the former, while Trachoma, and Scrophulous are examples of the latter kind and demand a separate consideration. It will be my province here to speak of Scrophulous. I shall treat its symptoms, causes, Prognosis, disease induced by it and lastly its treatment.

Scrophulous Ophthalmia.

Attacks every age and sex, and like all other diseases of an inflammatory type varies much in its degree of severity and attack. Even when so prevalent as to appear epidemic the symptoms, are at one time remarkable for their comparative mildness, and at another for the violence and rapidity of their progress. Hence for propriety the disease may be arranged under two heads the Mild and acute, varying only

in degree, but in each there are two distinct stages. In the former we have increased action of the vessels of the part characterised by all the symptoms of Phlogosis. In the latter or second stage there is obvious pain, tumour and debility of the part as a consequence of this previous excitement. Stasis Ophthalmica.

Is characterised by redness of the conjunctiva and lining of the eye lids, an unusual sensation of heat in the eye, uneasiness and piercing pain, as if some foreign body had got entangled between the palpebra and eye ball, as the disease advances a slight head ache comes on which is most troublesome towards evening. Vessels begin to shoot out where they never before had been suspected to have existed, so that the whole conjunctiva in the course of a few hours appears to have generated for itself myriads of vessels, which ramify the eye in every direction, of a florid colour

and when the swelling and itching are the most intense the inflammation is found to be the most extensive. In this case, the inflammation abates as gradually for a day or two, than it begins to revive. After these the disease passes into the second stage. The pain now in a great measure abates, a more or less profuse the aspect of the eyes change from a bright red to a deep purple, and by a judicious treatment the involution in a few days is noted to commence.

Third Stage.

In this variety the symptoms are more strongly marked, redness in the invasion and rapid in their progress, commencing generally towards evening, or at night with out the slightest preceding uneasiness. The patient feels all at once as if some some sharp or pricking body were rolling over the ball of the eye attended with the painless irritation of burning



and it is not regulated by a splanchnic
 quantity fluid so acid as to excrete the parts
 for which it flows, sometimes this secretion is
 very much diminished or entirely suspended and
 the eyes become preternaturally dry, the sym-
 ptomatic fever is considerable, with headache
 and pain in the back part of the head the pupil
 becomes contracted, the conjunctiva assumes a
 deep red colour without the possibility of tracing
 its individual vessels but all being in a like state
 of congestion seems an occurrence which is caused
 the general swelling imbedded in it. sometimes it
 extends so far as to produce the lids projecting
 out in the form of a and frequently more between
 them and is frequently covered with a puriform
 matter. the lids become extremely distend-
 ed, owing to the violent action of the inflamed
 eyes, head becomes extricated between the con-
 junctiva and sclerotic coats in consequence of which



the conjunctiva, being naturally loose, becomes in-
 creasingly distended and elevated in front of the eye,
 preventing the lids from closing over the eye exposing it
 to wind and dust which is easily incorporated the conjunc-
 tiva then is termed granular. The tears by this means
 is usually confined to the outer part of the eye extend-
 ing no further than the conjunctiva. But sometimes
 the interior of the eye is alone affected the outer coats
 participating but little or not at all in the general
 disturbance of the eye. in this case the patient has on
 immense aversion to light so that even the slightest
 rays of light throw the eye into spasms obscuring
 the most acute agony. The iris appears as red appear-
 ance the pupil is exceedingly contracted and the
 aqueous humor becomes red and turbid. From these
 circumstances consisting that in the highest degree
 of internal ophthalmia. an extravasation takes
 place in the chamber of the eye between the sclera
 and choroid coats terminating, sometimes in an



entire top of night. In conclusion of the symptoms of
 Epithemia shall say a few words upon epidemic
 prevalent Epithemia, closely allied with symptoms,
 propounded terminations, to that Epithemia which
 has been the scourge of Egypt for nearly the last three
 centuries, which prevails throughout the eastern
 part of the state of New York during the spring months
 It has been noticed, remarkable in the temperature
 of the climate, this season which could well be
 considered as an excitant to this peculiar form of
 inflammation of the eye by the most observers. The
 winter was not remarkable for its dryness or continued
 ice of snow nor yet for its entire want of it. During
 the months of Dec and Jan there prevailed rather
 an average temperature of climate with the exception
 of one or two intense cold days during the latter
 month when the mercury of F. fell more than 100° below
 the freezing point. The month of Feb was moderate for its season
 and pleasant and resembled to spring.



whilst the month of March was more cold and
 unpleasant than either of the winter months,
 it was during this unequal intermixture of tem-
 peratures, which is still and constant winter
 months, when in cold and temperate regions,
 that a catarrhal fever known more generally
 by the name of Influenza prevailed almost un-
 usually, throughout our state extending its
 ravages far and wide, so that few if any, escaped
 its epidemic influence, not unlike measles,
 epidemics of this kind exhibiting various degrees
 of morbid affection, in some instances, it rises to
 slight as not to incapacitate persons from pursuing
 their ordinary avocations scarcely needing the aid
 of the Physician, whilst in others it was a more
 acute demand but almost mortal, frequently
 interrupting life and in many instances, attending
 to the human in children and persons advanced
 in life, especially those who had a predisposition to



to Philadelphia, the modifications of this disease were extremely numerous, from the last of January until about the middle of March the weather was extremely variable and the cold often severe. It was during this cold during an other that the Influenza raged with its great violence. About the last of March the weather changed and became uncommonly mild for the season and the disease began to disappear rapidly as the Influenza abated which no doubt depended on certain inexplicable change in the constitution of the time period. Another epidemic made its appearance more vigorous in its attack and more ~~various~~ various in its effect than the former disease. I say various in its effect for those who were first attacked with the Influenza, were immediately converted with symptoms not epidemic, peculiar to each as to the nature of the attack of the Influenza, for the more



violent the attack of the Influenza, the higher
 the inflammation of the eye, and vice versa. But
 those who were first seized with an affection of
 the eye were in every instance exempt from
 the Influenza, but in these two diseases the
 Ophthalmia was essentially different, in the
 former being merely a slight conjunctival affec-
 tion terminating passively generally in a few
 days with no constitutional disturbance. Whilst
 in the latter it was closely allied to the Influenza
 an Ophthalmia the usual period of its attack
 was several weeks, commencing not usually in
 its first symptoms the acute Ophthalmia with
 a red, swelling over the region of the eye, a pain
 of itching, and sensation of a sharp angular
 redness over the eye frequently in the
 course of these weeks across the lower eyelid be-
 came a brownish line marked with red blood
 the lower conjunctiva became thickened and the



lower lid exserting, however leaving its rays are torn
 apart with rapid in every direction, the lids constantly
 closed from the immense irritability of the eye to the
 least ray of light in consequence of which they became
 acquainted with the thin adhesive discharge which
 was seen that it was almost impossible to separate
 the lids without retaining the eye for some time
 previous in tepid water. If the lids were more open
 what to any extent the eye from admission of light
 became spontaneously opened, frequently causing an
 itches or vision of the lids, from the swelling and
 inflammation of the lids the conjunctival ducts became
 closed causing a continued epiphora, the tears
 running over the cheeks from their continually kept
 upon continued excretion, which however was then
 increased in this way becoming of a pale opalescent
 color, frequently in the course of a few hours the whole
 of the conjunctival covering of the eye became completely
 covered with small granulation of a yellow color.



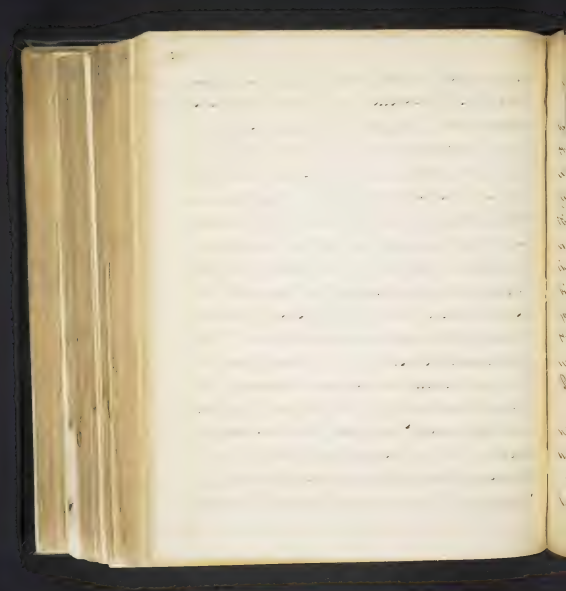
and fingers appearance, extending for some distance beyond the corner, a head ache at first slight now becomes constant penetrating to the back part of the occiput. sleep is disturbed, the nose mucous acquires red and such a degree of heat comes on as to confine the patient to his bed. Finally the whole system becomes greatly deranged the symptoms exacerbating towards evening and remitting towards morning in this way the disease if not arrested by the most active measures runs on for several days the inflammation generally attaining its height about the seventh or eighth day constituting what is called its first stage. The acute pain now in a great measure subsides, the eye becomes less sensible to light, while a run of humors and debility ensues, the vessels of the conjunctiva are impregnated with blood of a purplish hue the purulent discharge now increased in quantity the opening appearance of the corner shows effusion, a number of little projections on its margin



14.
the swelling, redness, tension, and pain abate and
if the patient has not exposed himself to a renewal
of the attack in the course of a fortnight he is con-
sidered to have reached a state of convalescence this however
is the most favorable form of the disease. In the more
violent form of the disease it runs through its stages
with much greater rapidity, destroying the eye some-
times in the course of a few hours, frequently in the course
of a few days after the first symptoms the eyelids
become completely closed with granulations on their in-
ner surface the conjunctival vessels of the eye present
a purplish appearance which gradually terminates in
necrosis and separation which sometimes penetrates
deeply into the corner of the eye and excavating the
necessaries and destroying the sight entirely.
Adipose where the inflammation has been violent
is a frequent occurrence, induced by the heat
exposed to exciting cause or irregularity of living
In such cases all the symptoms of the first stage



are renewed but with diminished energy, and generally with ~~diminished~~ much shorter duration. Bringing these frequent relapses together, the former sometimes to no place, or ulceration as has been mentioned leaving a number of little depressions on the cornea which sometimes extend so far into the centre, the coats of the eye causing Staphyloma. or where the inflammation has run very high or been deep seated Hypopyon or a formation of a purulent matter in the anterior or posterior chamber & the anterior chamber is increased which is an enlargement of the immovable lamellae. or Staphyloma which is an extension of the external lamina of the conjunctiva converted into a bony number one which may take place at either angle, or middle of the eye, more commonly however near the angle. All of which will sometimes terminate fatally when it seems to reach the consequences, &c.



Causes of Ophthalmia.

The causes of this disease are extremely numerous and various among the most prominent of which are exposure of the eyes to intense and strong light, exposure to heat or cold, moist and cold atmosphere, sudden transition of matter, draughts of cold air, strong winds and dust. Foreign bodies entangled in the eye, such as quills and vapours, external violence such as blows, wounds, and punctures, general matter by actual contact with the eye, the lining of the eye, the frequent use of spirits, increased rate of the digestive organs.

To determine the severity and extent of inflammation when light is thrown on the eye, by the degree of pain produced, when the pain produced by light is extremely acute and lancinating, as in the bottom of the



eye and its appendages are affected, but when the pain is little or not at all increased by this exposure we may with reason infer that the inflammation is superficial, and will be of short duration. But when the external marks here, but little proportion to the degree of pain in the ball of the eye, when the third eye and intolerance of light are constant and violent we may on the other hand premeditate that the disease will have neither a quick or a termination. But when in addition to the above favourable symptoms the inflammation has run through its stage quiescent, and without being violent in its progress, the colour of the conjunctival vessels which from the commencement the tint is usually greenish, I shall now quote a few words of the conjunctiva, of the cornea, of the iris, &c. with a feeling of gratitude composed derived from the spirit of Cabinet of Science, which on the anatomical correctness, of its drawings, and natural appearance of the proper



ins are repelled by fire and surprised by no minute
detail in her country, and excelled by few in her
possessions of Ophiolite.

Among the rest of
there is a series of the Comanche and Apache
mountains at its commencement a soft indolent mul-
berry, occurrence of a red solid color not very faint
at the w. impeding the w. of the into the black
up a continual exposure of water in the w. corner
wing in the it impairs the motion of the hills near
them constantly open in this place there are two
rivers the Colorado and San Juan. The river seldom
terminates entirely but after this it flows it flows
is isolated and isolated entirely generally in the
mountains. which assumes a cancerous appearance
and which is very difficult to eradicate.

Thyridium. or by wing as it is commonly called
is a thin transparent membrane covering
with its shape towards the joint, not arising uniformly



from the inner surface but also from the external and sometimes from the central part of the eye. I have supposed it to be a natural expansion or separation of the thin external laminae of the conjunctive covering into a vesicular membrane succeeding, a long and distinct distension, or a very severe and violent attack seldom extending beyond the middle of the eye.

Ulceration of the Cornea.

Sometimes occurs on the external surface of the Ball as a consequence of previous inflammation. The first sign the Ulceration has commenced may be known by its becoming of a brownish colour and violently prominent, attended with exquisite pain the matter discharged is not genuine pus, but an ichorous serous exudation, the parts over which it flows, the Ulcer often degenerates into a very obstinate & uncurable the Cornea and Laminæ open its anterior chamber and sometimes joining into the vitreous.

Opacity of the Cornea, of this kind there are three distinct



this noticed by winter and the former of which, though
 and sometimes deep black is understood, a suspicious
 opacity of the cornea, generally arising from chronic
 inflammation, covering its surface as it were with a thin
 lid or mist giving it a dull and turbid appearance occa-
 sioned by the unequal enlargement of the vessels which
 remain on the conjunctiva. It is a thin, moist and
 a red distention of the cornea which is a whitish matter which in its
 nature, is very between the thin external part of the con-
 junctiva which means that the cornea gives it a new appearance
 though arises from a disposition to thicken from the loss
 of the cornea deep seated in the sclerotic also being of a
 white or milky colour.

Leucoma, is a dense white spot of the cornea arising
 from the most violent kind of inflammation attended with
 excessive sometimes following small pox or measles.
 The pupilla, when leucoma has been once and of
 long standing, and the internal part of the eye have
 been deeply affected is a species of supposition it is suppo-



it takes place either in the posterior or anterior chamber of the aqueous humor constituting the disease sometimes it disappears after a continuance of some bright light, at other times it continues to increase causing a blindness. The disease and destruction of the eye. Among the last of the diseases not yet last prominent as a consequence to ophthalmia which I shall now mention is.

Staphylococcus which arises sometimes as a consequence to ulceration of the cornea and is a thickening and opacity of the humor & the lens & the cornea not a part or in its projection toward the eye but proceeding gradually to become an ophthalmia or removal of the cornea, sometimes through very much, the humor is absorbed, but the light is entirely lost.

Treatment.

In the primary stage a simple conjunctival ophthalmia may be removed in a short time little more will be often necessary, than to avoid.



every external source of irritation, to bathe the eyes
frequently in cold water, have diet, the patient con-
fining himself to a dark room, protecting the eyes
with a opaque shade, but if there is much pain and
a severe swelling, the conjunctiva, the disease
will be much hastened by the timely applica-
tion of more active remedies, among the most important
of these is kohlutins both general and
local, which sometimes, such as the neutral salts
are preferable as they have the peculiar property of
operating in small doses by repetition strongly on
the exhalants of the intestinal canal producing
copious watery evacuations, highly important when
a phlogistic diathesis prevails. Transacting some of
urinary, Saliva behind the ears over the base
of the neck over the temples to these directions if
strictly attended to will in a few days reduce the
patient generally to a state of convalescence
sometimes however this treatment will not



needed, and resort to medicine, even earlier
 on the part of the surgeon the disease remains
 in second stage, which is one of the greatest difficulties
 which the surgeon experiences in the treatment
 of this disease. The making a proper discrimination
 between the first or stage of inflammation and
 the second or stage of disorganization. The decided and
 hypersthenic remedies which are so essential to a cure
 in the one, are usually forbidden in the other
 it becomes therefore highly important to a successful
 practice to make a proper discrimination between
 these two opposite stages. The second stage is character-
 ized by severe pain, tenderness and debility of the
 lids of the conjunctiva which are increased with heat
 of a purple hue, extravasations of blood in the cham-
 ber of the aqueous humor. St. hyperemia of the conjunct-
 iva, a sensation of heaviness and itching in the eye.
 In this stage every thing which has a tendency to pro-
 duce further weakness of the eye must be avoided. Cold



and astringent washes, should now be used. by mea-
ns, which the relaxed vessels of the conjunctiva and
veals will recover their original tone and the
Ophthalmia be removed.

Treatment of Acute or Transient Ophthalmia.

This suppurated form of the disease demands the most
active and immediate assistance from the eye con-
sists is, neglected in its primary stage entails
in the sequelae, happens the least degree of Oph-
thalmia terminates either in a partial or entire
blindness, running through its acute or sub-
acute stage, and recovers the vision
within a moderate time in a very short time.
The first indication then for advice is to reduce
promptly the eye excitement or the hyperemia which
always prevails in the most violent nature, more just
involvement, first by general bloodletting which must
be resorted to what ever extent the case may require
and it is extraordinary to what an extent the benefit



may be carried in some cases before the disease well begin
 away. The late Dr. Sowerby relates a case under his care
 in the Brompton Hospital, where the term of the Ophthalmia
 was so violent as to demand repeated & profuse bleeding
 if in a suppurative case, attended with copious puru-
 shing, as the Ophthalmia would give way. After
 relieving the general morbid action, remedies may
 then be resorted to and with advantage, hyaloid,
 topical blood letting, from the temporal artery,
 dissection of the conjunctival vessels of the lids and
 under the eye, which may be performed with a common
 instrument adapted for writing, the lids divided the
 blood as near their roots as possible and in extract-
 ing as the discharge the eye must be bathed for
 some time in warm water. The quantity drawn
 however carefully performed is seldom very great
 but even a quantity extracted is more innocent than
 laceration & pain and inflammation to result from a
 purgative obtained in this way, than from usual



nances detracted from the temple. In slight affections
 even two localizations will be sufficient, but in the
 more severe ones, especially in the Blandet form it
 will be found necessary, to destroy repeatedly, each
 however should be taken, only to perform this operation
 in the first stage, when the eye is alone a few redness
 small and round. But when the lacer are of a
 few days more, when related the the patient com-
 plains of some & weight and coldness in the eye, then
 it will be very improper and injurious principles
 to an operation between the conjunctiva and sclerica.
 Another have been known therefore, if in this stage of
 the disease, the saline cathartics should be given in
 small and repeated dose is also cooperate with the eye
 to equal depletion existing a sympathy between the
 various membranes of the interior and eye.
 Distention to the back of the back, behind the eye is
 to the temple to the eye is as just introduced
 to the medicine used by this distinguished.



Indigestion of Anatomy, which is found to afford a certain and speedy relief, when the disease has proved very obstinate and the inflammatory stage ran very high. Mercury has been recommended so as to induce salivation. But as to this mode of practice, I cannot say that much import can be attached, having frequently seen it effected in obstinate cases without affording the least relief, on the contrary, only aggravating the mischief of the unhappy subject. As belladonna but of the thickest kind such as water or milk in these cases should be used. In the second stage they are found highly important, but it will be to propose any particular formula as almost every physician has some favourite prescription. A very good belladonna which I have seen used is made from six of blunted drops of tincture in proportion of 50 of the one and 4 of the latter with the addition of a few drops of lavender to the cream of tartar

has been recommended by Dr. Shipch in cases of obstinate Ophthalmia, with signal advantage. To prevent adhesions of the lids they should be frequently anointed with Ointment made semisolid by the addition of a little Olive Oil, and applied with a fine Camels hair pencil. The granulations which form on the surface of the eye and lids may be removed by applying caustic. either the pulvis of Coppers Chloride caustic may be used. Next the lids and apply the caustic untill the granulations assume a whitish appearance when it may be washed off by means of a fine brush. Besides in this stage of the disease are highly useful among the list of which are pulvs. of Quinine, Vegetable Acids and the Mineral acids. Infuse. &c. topical and general. Emetics, have diet, Abstinence, and giving the Patient to a dark room during the inflammatory stage. Antipyretic Colours besides in the second stage will often fail in curing the Ophtha

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